Yes		3	No	

Disclosure Report Cover

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information.

1. Committee Information							
a. Full Name				c. ID Number			
Wease For SI	variff			= 116			
b. Mailing Address (include City, State	and Zip Code)	(55	d. Date Filed				
			RECEIVED JUL 9 2018 RUTHERFORD COUNTY BOARD OF FLECTOR				
			PUTUS 9 2018	e. Phone Number			
			BOARD OF FLECTION				
2. Report Year 3. Period Start	Date (mm/dd/yy	4. Period H	and Date (mm/dd/yy) 5. Treas	urer Full Name			
6. Type of Committee (Check O			eport from one category)				
Candidate Campaign Part	-	unicipal	State/County	Referendum			
PAC Referendum		Organizationa		☐ Organizational			
	t Fundraiser	Thirty-five day	14 <u>1667</u> 1674	Pre-referendum			
Legal Expense Fund		Pre-primary	First	☐ Final			
7 T	 =	Pre-election	Second	Supplemental Final			
7. Type of Fund (if applicable, Booster Fund	cneck one)	Pre-runoff	Third	Annual			
Building Fund	l-	Semi-annual	Fourth	☐ Special			
Building Fund	I ⊨	Mid Year End		10 Consist Depart No.			
Other:	15] Final	Mid Year Year End	10. Special Report Name			
8. Number of Fundraisers this	Report	Special	Final	1			
or rumber of rundraisers this	Report	Бресы	The state of the s				
			☐ Special				
11. Account Information		11. Account Information					
a. Financial Institution Full Name			a. Financial Institution Full Name				
b. Purpose	c. Account Code		b. Purpose	c. Account Code			
a							
	d. Period Begin I	Balance		d. Period Begin Balance			
\$				\$			
CERTIFICATION							
I certify that the Committee or Fun of the NC General Statutes and tha							
report is complete, true and correct							
report is complete, true and correct	and that I have t	occii tranicii by	die Ive State Board of Elections.				
Jason Ren	Woass	1,0	nton ///200	7-9-18			
Printed Name of Signe	er	Sign	nature of Appointed Treasurer	Date			
FOR OFFICE USE ONLY	1 0 4		0 - 1				
V	1-9-18		X	Delivery Method			
Date Received:	1 110	Employ	/ee:	Normal Mail			
Data Bartana India		7		Registered Mail			
Date Postmarked:		Employ	/ee:	☐ Hand Delivered			
Date Scanned: Emp		Employ	lee.	☐ Electronically Filed			
	Employee:		Cionar bea not manimal				
Date Data Entered:	Employ		/ee:	Signer has not received mandatory training			
Please Note: This form cannot be used to amend committee information such as the committee address, treasurer,							
assistant treasurer, custodian of books information, or account information.							
			(CRO-2100A-E) to make con				

No
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D. 1			Amendment		
Disbursements	Pg	of	☐ Yes	Пм	0
7 17 7		 			

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political

committees and coordinated party expenditures 1. Committee Full Name (and Fund if applicable) 2. ID Number Vease 3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) Operating Expenses Contributions to Candidates/Political Committees Coordinated Party Expenditures 4. Pavee Information Add ☐ Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) First Citizens Bank c. Level Registered (Specify) Federal County: State Municipality: e. Election Sum to Date f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks 7-9-2018 20.00 Fee 4. Payee Information ☐ Add ☐ Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) c. Level Registered (Specify) Federal County: State ■ Municipality: e. Election Sum to Date f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) | j. Amount k. Required Remarks 4. Payee Information Add □ Remove a. Full Name, Mailing Address & Phone b. Coordinated Committee Name d. Comments (include city, state, & zip) c. Level Registered (Specify) Federal County: State Municipality: e. Election Sum to Date h. Purpose Code i. Date (mm/dd/yyyy) j. Amount f. Account Code g. Form of Payment k. Required Remarks 5. Total only this Page \$ 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) \$ (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures) 7. Purpose Codes (List detailed expenditure code in (h.) above) A* - Media B* - Printing C* - Fundraising D - To Another Candidate E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Expenses I - Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund O* Other

* Codes require detailed explanation in required remarks field (k)